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PROPERTY INFORMATION FORM

Please note that the GIS Department and Gallatin City County Health Department may require a completed copy of this form prior to issuing an address, license or permit. Please discuss your proposed project with the Health Department (582-3120), County Road & Bridge Department (582-3250) and State Building Codes Bureau (841-2069) to learn about other approvals that may be necessary for your project.

Landowner Name		Phone	Ema	nil		
Mailing Address						
Name of Authorized Agent Phone						
Address(if existing) / Road Name of Site						
Subdivision/COS# Lot/Tract/Parcel				Block		
Legal Description1/4	¼ Secti	on To	wnship	Range		
Description of Existing Buildings on Prop	erty					
Description of Proposed Project Other (please describe)	Single-Family	Multi-Family		rcial/Industrial	Mixed	d Use
BY SIGNING BELOW, THE ABOVE NAME COMPLIANCE WITH APPLICABLE COUNTERMITS/APPROVALS PRIOR TO COMMIT MANDATORY AND THE RESPONSIBILITY	TY REGULATION MENCING THE A	IS, INCLUDING BUT ACTIVITY FOR WH	NOT LIMITED TO	O OBTAINING AN	NY NECES	SARY
Property Owner or Authorized Agent Signature Date						
Printed Name						
THIS SECTION TO BE COMPLETED BY PLANI	NING DEPARTME	NT BASED ON REGU	LATIONS IN EFFE	CT ON DATE FOR	M IS COMP	LETED
A. Zoning Property is located in a zoning district: Zoning-related permits/approvals a				roiect	YES YES	NO NO
B. Subdivision & Platting Act				.,		
The above project appears to require review under the Subdivision Regulations						NO
C. Building by Lease or Rent The above project appears to requi	re review unde	r the Building by L	ease or Rent Re	egulations	YES	NO
D. Floodplain At least a portion of the above property by FEMA and is subject to the Flood Information Request Form to obtain	Iplain Regulatio	ns. Landowner is a			YES	NO
E. Other Planning Jurisdiction Prior to construction the Landowne City of Belgrade (388-4994)		red to contact: attan (284-3235)	Three Forks	(285-3431)	YES	NO
Other Comments:						
Planning Department Signature						
			Date			
Printed Name			_			